

CHALLENGE EXAMINATION APPLICATION

Challenge examinations are available for courses that fulfill the specialized training requirements for State Merit System classifications Certified Professional Counselor – Alcohol and Drug, Supervisor and Certified Professional Counselor – Alcohol and Drug, Advanced.

Name (print) _____ SS# _____

Home Address _____

City _____ State _____ Zip Code _____ Home Phone # _____

Work Phone # _____ Email Address _____

Name of Employer _____

TITLE(S) OF COURSE(S) BEING CHALLENGED

1)

2)

3)

4)

You will be allotted 1.5 hours for each examination. The fee is **\$30.00** per examination.

Total Payment: **\$30.00** X _____ = \$ _____
{# of examination(s)}

Total payment by check or money order OR Maryland state appropriation code for an R*Stars Transfer must be included in order for the application to be accepted. (No cash.) No purchase orders for state, local government or business. Only federal purchase orders accepted.

Total Amount Enclosed/Transferred \$ _____

IMPORTANT: Make check or money order payable to **Behavioral Health Administration**.

For payment by R*STARS Transfer: (Original coding and signature - not duplicated.)

(Agency Code) (Program) (Item/Source) (Fund) Fiscal Officer Signature

Send application to: Atten: Fiscal
c/o Office of Workforce Development & Training
Behavioral Health Administration
Voc Rehab Building
55 Wade Avenue, Catonsville MD 21218
Office: [410-402-8585](tel:410-402-8585)